STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER Black Hills Pioneer		2. DATE 9/14/11
3. FREQUENCY OF ISSUE Daily Except Sunday/Holiday	3A. NO. OF ISSUES PUBLISHED ANNUALLY 306	3B. ANNUAL SUBSCRIPTION PRICE $

4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) P.O. Box 7 Spearfish, Lawrence, SD 57783

5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) P.O. Box 7 Spearfish, Lawrence, SD 57783

6. FULL NAME OF PUBLISHER: Letitia Lister

7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.

FULL NAME — COMPLETE MAILING ADDRESS

8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run)	4132	4152
B. PAID AND/OR REQUESTED CIRCULATION 1. Sales through dealers and carriers, street vendors and counter sales.	3543	3563
2. Mail Subscription (Paid and or requested)	158	160
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	3701	3723
D. FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS	0	0
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	100	100
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	3801	3823
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	125	125
2. Return from News Agents	206	204
G. TOTAL (Sum of E, F1 and F2 – Should equal net press run shown in A)	4132	4152

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public

I swear that the statements made by me are true, correct, and complete:

Letitia Lister
(Signature)

publisher
(Title)

State of South Dakota)
§
County of Lawrence)

Sworn to before me this 14th day of Sept, 2011

Judith Richards
Notary Public

My commission expires: 10-24-2016

(Seal)

Form: SOS REC 051 7/2004